Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself			
			About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1. You		r full name			
		e the name that is on	Saddam		
	pictu exar	government-issued ure identification (for nple, your driver's	First name		First name
	licer	ise or passport).	Middle name	_	Middle name
		g your picture	Rawashdeh		
	identification to your meeting with the trustee.		Last name and Suffix (Sr., Jr., II, III)	_	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years			
	maio assu	ide your married or den names and any imed, trade names and g business as names.	Yusef Rawashdeh		
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.				
3.	you num Indi	the last 4 digits of r Social Security aber or federal vidual Taxpayer tification number	xxx-xx-2309		

4. Your Employer Identification Number (EIN), if any.		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
		EIN	EIN		
5.	Where you live		If Debtor 2 lives at a different address:		
		80 N Portage #11C9 Akron, OH 44303 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
above, fill it in here. Note the			County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

7.	The chapter of the Bankruptcy Code you are					Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Cha	apter 7								
		☐ Cha	apter 11								
		☐ Cha	apter 12								
		☐ Cha	apter 13								
8.	How you will pay the fee	a	about how yo	u may pay. Typica attorney is submit	ally, if you are paying the fee you	with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money lif, your attorney may pay with a credit card or check with					
						n, sign and attach the Application for Individuals to Pay					
			•	,	Official Form 103A).	only if you are filing for Chapter 7. By law, a judge may,					
		t a	out is not requipplies to yo	uired to, waive you or family size and	ur fee, and may do so only if you you are unable to pay the fee in	ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out ial Form 103B) and file it with your petition.					
).	Have you filed for bankruptcy within the last 8 years?	■ No.									
			District		When	Case number					
			District		When	Case number					
			District		When	Case number					
0.	Are any bankruptcy cases pending or being	■ No									
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes									
			Debtor	-		Relationship to you					
			District		When	Case number, if known					
			Debtor			Relationship to you					
			District		When	Case number, if known					
11.	Do you rent your residence?	■ No.	Go to I	ne 12.							
	residence:	☐ Yes	. Has yo	ur landlord obtain	ed an eviction judgment against	you?					
				No. Go to line 12							
				Voc Fill out Initio	A Statement About an Eviation	ludgment Against You (Form 101A) and file it as part of					

c	Are you a sole proprietor						
	of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of busin	ness		
t a s	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any			
S	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	e & ZIP Code		
	it to this petition.		Chec	Check the appropriate box to describe your business:			
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real E	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))		
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))		
				None of the above			
E a	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a s <i>mall business</i> debtor?	deadlines	s. If you ir is, cash-fl	ndicate that you are a ow statement, and fe	ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure		
	For a definition of small business debtor, see 11	No.	I am not filing under Chapter 11.				
ι	U.S.C. § 101(51D).	□ No.	I am f Code		1, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and under Subchapter V of Chapter 11.		
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and Subchapter V of Chapter 11.		
Part 4	4: Report if You Own or	Have Any	Hazardo	ous Property or Any	Property That Needs Immediate Attention		
r a	Do you own or have any property that poses or is alleged to pose a threat of imminent and	perty that poses or is ged to pose a threat Yes.	What is	the hazard?			
r (identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?			
-			. ioodou,	, io it noodod:			
j. I	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?			
·	argont ropuno:				Number, Street, City, State & Zip Code		

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

16.	What kind of debts do you have?			onsumer debts? Consumer del sonal, family, or household purpo		101(8) as "incurred by an			
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
				usiness debts? Business debts estment or through the operation					
			☐ No. Go to line 16c.						
			Yes. Go to line 17.						
		16c. Sta	te the type of debts you	owe that are not consumer debts	or business debts				
17.	Are you filing under Chapter 7?	□ No. I ar	n not filing under Chapte	r 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?						
	administrative expenses		No						
	are paid that funds will be available for distribution to unsecured creditors?		Yes						
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-5 ☐ 50,001-1 ☐ More tha	00,000			
19.	How much do you estimate your assets to be worth?	■ \$0 - \$50,000 □ \$50,001 - \$100,000 □ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$1,000,001 - \$10 milli □ \$10,000,001 - \$50 m □ \$50,000,001 - \$100 m □ \$100,000,001 - \$500	llion ☐ \$1,000,00 illion ☐ \$10,000,000,000,000,000,000,000,000,000,	1,001 - \$1 billion 20,001 - \$10 billion 200,001 - \$50 billion n \$50 billion			
20.	How much do you estimate your liabilities to be?	□ \$0 - \$50,000 ■ \$50,001 - \$100,000 □ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$1,000,001 - \$10 milli □ \$10,000,001 - \$50 m □ \$50,000,001 - \$100 m □ \$100,000,001 - \$500	llion ☐ \$1,000,0 illion ☐ \$10,000	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion			
Par	t 7: Sign Below								
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.							
			•	7, I am aware that I may proceed relief available under each chapt					
			If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						n.			
		bankruptcy cand 3571.		t, concealing property, or obtainir to \$250,000, or imprisonment for					
		Saddam Ra Signature of	washdeh	Signatur	e of Debtor 2				
		Executed on	May 12, 2025 MM / DD / YYYY	Execute	d on				

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Rebecca J. Sremack	Date	May 12, 2025
Signature of Attorney for Debtor		MM / DD / YYYY
Rebecca J. Sremack		
Printed name		
Sremack Law Firm LLC		
Firm name		
2745 South Arlington Road		
Akron, OH 44312		
Number, Street, City, State & ZIP Code		
Contact phone (330) 644-0061	Email address	info@sremacklaw.com
0092313 OH		
Bar number & State		

- #111	in this inform	ation to identify your	00001				5/12/25 10:27A
		ation to identify your					
Deb	otor 1	Saddam Rawash	Middle Name	Last Name	-		
	otor 2 use if, filing)	First Name	Middle Name	Last Name	_		
Unit	ted States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF OHIO			
Cas	e number				_		
(if kn							if this is an ded filing
Su Be a	mmary o	nd accurate as possib	le. If two married people	nd Certain Statistical Informate are filing together, both are equally respective information on this form. If you are fi	sponsible fo	r supplyin	
	original form			k the box at the top of this page.	mig amende	sa serieda	ics after you file
						Your as	ssets f what you own
1.	Schedule A/ 1a. Copy line	B: Property (Official Fee 55, Total real estate, f	orm 106A/B) rom Schedule A/B			\$	0.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B			\$	12,055.00
	1c. Copy line	63, Total of all propert	y on Schedule A/B			\$	12,055.00
Part	t 2: Summa	rize Your Liabilities					
							abilities t you owe
2.			laims Secured by Property mn A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Part 1 of <i>Sc</i>	hedule D	\$	15,436.00
3.			Unsecured Claims (Officia 1 (priority unsecured claim	I Form 106E/F) as) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Copy the	e total claims from Part	2 (nonpriority unsecured c	laims) from line 6j of Schedule E/F		\$	57,562.00
				Your total	al liabilities	\$	72,998.00
Part	3: Summa	rize Your Income and	Expenses				
4.	Schedule I: \ Copy your co	Your Income (Official Foombined monthly incom	orm 106I) e from line 12 of <i>Schedule</i>) I		\$	1,568.83
5.		Your Expenses (Official onthly expenses from li				\$	1,752.00

- Yes
- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,690.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	16,734.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	16,734.00

Fill in t	this inforn	nation to identify your	case and this filing:			
Debtor	1	Saddam Rawash	deh			
	_	First Name	Middle Name	Last Name		
Debtor (Spouse,		First Name	Middle Name	Last Name		
	•	al more than O and the other	NODTHEDNI DICTDICT OF OUR	2		
United	States Ba	nkruptcy Court for the:	NORTHERN DISTRICT OF OHI	J		
Case n	number _			-		☐ Check if this is an amended filing
						g
Ott:	ial Fa	rm 106Λ/D				
		rm 106A/B				
Sch	edul	e A/B: Prop	erty			12/15
think it f	its best. B	e as complete and accura e space is needed, attach	pe items. List an asset only once. If a ate as possible. If two married people a a separate sheet to this form. On th	are filing together, both a	are equally responsible for	supplying correct
Part 1:	Describe	Each Residence, Building	g, Land, or Other Real Estate You Ov	n or Have an Interest In		
1. Do yo	ou own or h	nave any legal or equitabl	e interest in any residence, building,	land, or similar property?		
■ No	o. Go to Par	t 2.				
☐ Ye	s. Where is	s the property?				
D. 10		Your Vehicles				
Part 2:	Describe	Tour Vernoies				
3. Cars □ No ■ Ye	0	ucks, tractors, sport u	tility vehicles, motorcycles			
3.1	_	Acura	Who has an interest in th	e property? Check one		claims or exemptions. Put ured claims on Schedule D:
		TLX	Debtor 1 only		Creditors Who Have C	laims Secured by Property.
		2015	Debtor 2 only Debtor 1 and Debtor 2 only		Current value of the	Current value of the
	Approximate Other inforn		7000 Debtor 1 and Debtor 2 o		entire property?	portion you own?
Γ			At least one of the debt			
			Check if this is comm (see instructions)	unity property	\$11,000.00	\$11,000.00
4. Wate	ercraft. air	craft, motor homes. A	TVs and other recreational vehi	cles, other vehicles, an	d accessories	
			onal watercraft, fishing vessels, sn			
■ No	•					
	-					
			you own for all of your entries fr			¢44 000 00
.pag	es you ha	ive attached for Part 2	. Write that number here		=>	\$11,000.00
Dout-0	L Danier 1	Vaus Dans 1	ahald kama			
Part 3:		Your Personal and Hous	ehold Items table interest in any of the follow	ing items?		Current value of the
Do you		.a.o any logal of equil	and the follow	g itoma :		portion you own?
						Do not deduct secured claims or exemptions.

claims or exemptions.

Debtor	1 Saddam Rawashdeh	Case number (if known)	3/12/23 TO.27AII
	sehold goods and furnishings amples: Major appliances, furniture, linens, china, kitchenware		
	'es. Describe		
	Household goods and furnishings		\$500.00
7. Elect Exa	amples: Televisions and radios; audio, video, stereo, and digital equipmer including cell phones, cameras, media players, games	nt; computers, printers, scanners; music co	ollections; electronic devices
ПΥ	es. Describe		
Exa. ■ N	ectibles of value amples: Antiques and figurines; paintings, prints, or other artwork; books, other collections, memorabilia, collectibles Ves. Describe	pictures, or other art objects; stamp, coin,	or baseball card collections;
	ipment for sports and hobbies amples: Sports, photographic, exercise, and other hobby equipment; bicycomusical instruments	cles, pool tables, golf clubs, skis; canoes a	and kayaks; carpentry tools;
■ N □ Y	Ves. Describe		
10. Fire <i>Ex</i> : ■ N	ramples: Pistols, rifles, shotguns, ammunition, and related equipment		
`	ves. Describe		
11. Clo <i>Ex</i> . □ N	camples: Everyday clothes, furs, leather coats, designer wear, shoes, acc	cessories	
Y	es. Describe		
	Miscellaneous clothes		\$200.00
■ N	ramples: Everyday jewelry, costume jewelry, engagement rings, wedding	rings, heirloom jewelry, watches, gems, g	old, silver
Ex. ■ N	n-farm animals ramples: Dogs, cats, birds, horses No 'es. Describe		
■ N	y other personal and household items you did not already list, inclu lo 'es. Give specific information	ding any health aids you did not list	
		ſ	
	dd the dollar value of all of your entries from Part 3, including any e or Part 3. Write that number here		\$700.00
Part 4:	Describe Your Financial Assets		
Do you	u own or have any legal or equitable interest in any of the following	?	Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1	Saddam Rawash	ndeh			Case number (if known)	
□ No	mples: Money you have	·	•	n a safe deposit box, and on hand v	vhen you file your petition	
					Cash	\$5.00
	institutions. If you			certificates of deposit; shares in creather the same institution, list each.	edit unions, brokerage houses	, and other similar
	S			Institution name:		
	17	7.1. Checl	king	Huntington Bank		\$200.00
	17	7.2.		Cryptocurrency with Robinh currency	nood - Shibu Inu	\$150.00
	•			ge firms, money market accounts		
☐ Ye	S	Institutio	on or issuer name	e:		
join ■ No	t venture			d and unincorporated businesses	s, including an interest in an	LLC, partnership, and
	·	Name of en			% of ownership:	
Neg Non ■ No	otiable instruments inclu negotiable instruments	ide personal are those yo	checks, cashiers u cannot transfei em	e and non-negotiable instruments 'checks, promissory notes, and mo to someone by signing or delivering	ney orders.	
Exa ■ No	•	ERISA, Keog	gh, 401(k), 403(b), thrift savings accounts, or other pe	ension or profit-sharing plans	
⊔ Ye	s. List each account sep Ty	parately. ype of accou	nt:	Institution name:		
You Exa	mples: Agreements with	posits you ha		you may continue service or use fro		others
■ No	S			Institution name or individual:		
23. Ann ı	` .	eriodic paym	ent of money to	you, either for life or for a number of	years)	
		name and de	escription.			
	S.C. §§ 530(b)(1), 529A			ed ABLE program, or under a qua	alified state tuition program.	
		ion name and	d description. Se	parately file the records of any interest	ests.11 U.S.C. § 521(c):	
25. Trus		interests in	property (other	than anything listed in line 1), and	d rights or powers exercisab	le for your benefit

 $\hfill \square$ Yes. Give specific information about them...

Deb	tor 1	Saddam Rawashdeh		Case number (if known)	
_	Examp		sescrets, and other intellectual property sites, proceeds from royalties and licensing agreements	ents	
	No Yes.	Give specific information about the	nem		
		es, franchises, and other gener. bles: Building permits, exclusive lid	al intangibles censes, cooperative association holdings, liquor lice	nses, professional licenses	
	No Yes.	Give specific information about the	nem		
Mon	ey or p	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	No	unds owed to you Give specific information about th	em, including whether you already filed the returns a	and the tax years	
_		support oles: Past due or lump sum alimon	y, spousal support, child support, maintenance, div	orce settlement, property set	tlement
	Yes.	Give specific information			
			Shereen Farghaly, mother of child, owes undetermined amount in child support. DR-2022-03-0455		Unknown
•	Examp No	amounts someone owes you oles: Unpaid wages, disability insu benefits; unpaid loans you m Give specific information	rance payments, disability benefits, sick pay, vacati ade to someone else	on pay, workers' compensat	tion, Social Security
_		ts in insurance policies oles: Health, disability, or life insur	ance; health savings account (HSA); credit, homeov	vner's, or renter's insurance	
		Name the insurance company of			
		Company r	name: Benefici	ary:	Surrender or refund value:
	If you a	erest in property that is due your the beneficiary of a living trust ne has died.	u from someone who has died , expect proceeds from a life insurance policy, or are	e currently entitled to receive	property because
		Give specific information			
_			or not you have filed a lawsuit or made a demand ites, insurance claims, or rights to sue	d for payment	
		Describe each claim			
	No	contingent and unliquidated cla Describe each claim	ims of every nature, including counterclaims of	the debtor and rights to se	t off claims
		ancial assets you did not alread	dy list		
	No	Give specific information			

Deb	tor 1	Saddam Rawashdeh		Case number (if known)	
36.		the dollar value of all of your entries from Part 4, includi art 4. Write that number here			\$355.00
Part	5: De	scribe Any Business-Related Property You Own or Have an Inte	erest In. List any real esta	ate in Part 1.	
37. D	o you	own or have any legal or equitable interest in any business-rela	ted property?		
	No. Go	o to Part 6.			
	Yes. (Go to line 38.			
Part		escribe Any Farm- and Commercial Fishing-Related Property Yo you own or have an interest in farmland, list it in Part 1.	u Own or Have an Intere	st In.	
		u own or have any legal or equitable interest in any farm	- or commercial fishir	ng-related property?	
	No.	Go to Part 7.			
	☐ Yes	s. Go to line 47.			
	<i>Exam_l</i> No	u have other property of any kind you did not already list ples: Season tickets, country club membership Give specific information	1?		
54.	Add	the dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part '	1: Total real estate, line 2			\$0.00
56.	Part 2	2: Total vehicles, line 5	\$11,000.00		
57.	Part :	3: Total personal and household items, line 15	\$700.00		
58.	Part 4	4: Total financial assets, line 36	\$355.00		
59.	Part :	5: Total business-related property, line 45	\$0.00		
60.	Part (6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 1	7: Total other property not listed, line 54	+\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$12,055.00	Copy personal property t	otal \$12,055.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$12,055.00

						-	5/12/25 10:27AN
Fi	II in this informa	ation to identify your ca	ise:				
De	ebtor 1	Saddam Rawashde					
De	ebtor 2	First Name	Middle Name	L	ast Name		
1 1	ouse if, filing)	First Name	Middle Name	L	ast Name		
Ur	nited States Bank	cruptcy Court for the:	NORTHERN DISTRICT OF	ОНЮ			
C-	ase number	_					
1	(nown)					☐ Check if this is amended filing	
<u>O</u>	fficial For	m 106C					
S	chedule	C: The Pro	perty You Cla	im	as Exempt		4/25
the nee	property you list	ed on Schedule A/B: Proattach to this page as ma	pperty (Official Form 106A/B)	as yo	ther, both are equally responsible for our source, list the property that you age as necessary. On the top of any	claim as exempt. If more sp	ace is
spe any fun exe	ecific dollar amo applicable stands ds—may be un emption to a par	ount as exempt. Alterna tutory limit. Some exen limited in dollar amoun	atively, you may claim the in options—such as those for t. However, if you claim ar	full fai r healt r exen	ount of the exemption you claim. (ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu letermined to exceed that amount	ing exempted up to the an enefits, and tax-exempt re e under a law that limits th	nount of etirement ne
Pa	rt 1: Identify	the Property You Clain	n as Exempt				
1.	Which set of e	exemptions are you cla	iming? Check one only, eve	n if yo	our spouse is filing with you.		
	■ You are clai	ming state and federal ne	onbankruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	_	ming federal exemptions			(-/(-/		
2				emnt	fill in the information below.		
	Brief description	n of the property and line of	on Current value of the	• •	ount of the exemption you claim	Specific laws that allow exe	emption
	Schedule A/B th	at lists this property	portion you own Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Cash		\$5.00	_	\$5.00	Ohio Rev. Code Ann.	§
	Line from Sche	edule A/B: 16.1	Ψ3.00	_		2329.66(A)(3)	
					100% of fair market value, up to any applicable statutory limit		
	Checking: H	untington Bank	\$200.00		\$345.00	Ohio Rev. Code Ann.	§
	Line from Scrie	edule A/B. 17.1			100% of fair market value, up to	2329.66(A)(3)	
					any applicable statutory limit		
	Cryptocurrer Shibu Inu cu	ncy with Robinhood	\$150.00		\$150.00	Ohio Rev. Code Ann. 2329.66(A)(18)	§
	Line from Sche				100% of fair market value, up to any applicable statutory limit	,,,,	
3.	(Subject to adju	ustment on 4/01/28 and e		ases fi	led on or after the date of adjustmer	,	

☐ Yes

					_	5/12/25 10:27A
Fill in this informa	ition to identify you	ır case:				
Debtor 1	Saddam Rawas		_ast Name			
Debtor 2	i iist ivaille	Middle Name	.ast Ivaille			
(Spouse if, filing)	First Name	Middle Name L	ast Name			
United States Bank	ruptcy Court for the	NORTHERN DISTRICT OF OHIC)			
Case number						
(if known)					☐ Check	cif this is an
					amen	ded filing
Official Form	106D					
		Who Have Claims So	acurad	hy Property	\	12/15
Scriedale L	b. Creditors	Wild Have Claims 3	scui eu	by Fropert	<u>y</u>	12/13
is needed, copy the A		If two married people are filing together, out, number the entries, and attach it to t				
number (if known).	ava alaima aaavuud k					
1. Do any creditors ha		y your property? his form to the court with your other sc	shodulos Vo	u hava nothing also t	a rapart on this form	
_		·	nedules. 100	u nave notning else ti	o report on this form.	
	Ill of the information	below.				
Part 1: List All S	Secured Claims			Column A	Column B	Column C
for each claim. If more	e than one creditor has	more than one secured claim, list the creditors a particular claim, list the other creditors in cal order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 Bridgecrest	t Credit	Describe the property that secures the	claim:	\$15,436.00	\$11,000.00	\$4,436.00
Creditor's Name		2015 Acura TLX 107000 miles				
1800 N Cold		As of the date you file, the claim is: Che apply.	eck all that			
Gilbert, AZ	85233	☐ Contingent				
Number, Street, C	ity, State & Zip Code	☐ Unliquidated				
Who owes the debt	2 Charle and	☐ Disputed Nature of lien. Check all that apply.				
_	or Check one.	_				
■ Debtor 1 only		 An agreement you made (such as mo car loan) 	rtgage or secu	ired		
☐ Debtor 2 only ☐ Debtor 1 and Debt	tor 2 only		uniala lian)			
_	,	☐ Statutory lien (such as tax lien, mecha	.nic s ilen)			
	☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a ☐ Other (including a right to offset)					
community debt		☐ Other (including a right to offset)				
Date debt was incurr	red 12/01/2021	Last 4 digits of account number	8601			
Add the dollar valu	ie of your entries in C	column A on this page. Write that number	r here:	\$15,43	6.00	
If this is the last pa Write that number		the dollar value totals from all pages.		\$15,43		
write that number	nere:			Ţ,. <u>.</u>		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in thi	s information to identify your c	ase:			
Debtor 1	Saddam Rawashd	eh			
	First Name	Middle Name	Last Name		
Debtor 2	ling) First Name	Middle Nome	Last Name		
(Spouse if, fi	ling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case nun	nher				
(if known)					☐ Check if this is an
					amended filing
O((; . ; .)	E 400E/E				
	Form 106E/F				40/45
	ule E/F: Creditors W			Part 2 for creditors with NONPRIORIT	12/15
Schedule Deft. Attach): Creditors Who Have Claims Secu	red by Property. If more sp. e. If you have no information	ace is needed, copy	any creditors with partially secured c the Part you need, fill it out, number th do not file that Part. On the top of any	ne entries in the boxes on the
	y creditors have priority unsecured				
_	. Go to Part 2.	rolanno agamot your			
☐ Ye					
	S.				
Part 2:	List All of Your NONPRIORITY	Y Unsecured Claims			
Part 2:	List All of Your NONPRIORITY y creditors have nonpriority unsecu				
Part 2: 3. Do an	y creditors have nonpriority unsec	ured claims against you?	urt with your other sch	edules.	
Part 2: 3. Do an ☐ No	y creditors have nonpriority unsections. You have nothing to report in this pa	ured claims against you?	urt with your other sch	edules.	
Part 2: 3. Do an	y creditors have nonpriority unsections. You have nothing to report in this pa	ured claims against you?	urt with your other sch	edules.	
Part 2: 3. Do an No Ye 4. List al unsections	y creditors have nonpriority unsections. You have nothing to report in this pass. I of your nonpriority unsecured claured claim, list the creditor separately ne creditor holds a particular claim, list	ured claims against you? art. Submit this form to the countries in the alphabetical order for each claim. For each claim	er of the creditor who	o holds each claim. If a creditor has mo type of claim it is. Do not list claims alrea three nonpriority unsecured claims fill o	dy included in Part 1. If more
Part 2: 3. Do an No Ye 4. List al unsecuthan o	y creditors have nonpriority unsections. You have nothing to report in this pass. I of your nonpriority unsecured claured claim, list the creditor separately ne creditor holds a particular claim, list	ured claims against you? art. Submit this form to the countries in the alphabetical order for each claim. For each claim	er of the creditor who	b holds each claim. If a creditor has mo ype of claim it is. Do not list claims alrea	dy included in Part 1. If more
Part 2: 3. Do an No Ye 4. List al unsect than o Part 2.	y creditors have nonpriority unsection. You have nothing to report in this pass. If of your nonpriority unsecured claured claim, list the creditor separately ne creditor holds a particular claim, list	ured claims against you? art. Submit this form to the countries in the alphabetical order for each claim. For each clairs at the other creditors in Part 3	er of the creditor who	b holds each claim. If a creditor has mo ype of claim it is. Do not list claims alrea	dy included in Part 1. If more ut the Continuation Page of Total claim
Part 2: 3. Do an No Ye 4. List al unsecuthan o Part 2:	y creditors have nonpriority unsect. You have nothing to report in this pass. If of your nonpriority unsecured claured claim, list the creditor separately ne creditor holds a particular claim, list. Best Buy CBNA onpriority Creditor's Name	ured claims against you? art. Submit this form to the countries in the alphabetical order for each claim. For each clairs at the other creditors in Part 3. Last 4 digits	er of the creditor who m listed, identify what If you have more than of account number	p holds each claim. If a creditor has mo type of claim it is. Do not list claims alrea three nonpriority unsecured claims fill or	dy included in Part 1. If more ut the Continuation Page of
Part 2: 3. Do an No Ye 4. List al unsecuthan o Part 2: 4.1 E	y creditors have nonpriority unsect . You have nothing to report in this paid. s. If of your nonpriority unsecured claim, list the creditor separately ne creditor holds a particular claim, list. Best Buy CBNA onpriority Creditor's Name 800 South Corp PI	ured claims against you? art. Submit this form to the countries in the alphabetical order for each claim. For each clairs at the other creditors in Part 3. Last 4 digits	er of the creditor who In listed, identify what If you have more than	p holds each claim. If a creditor has mo type of claim it is. Do not list claims alrea three nonpriority unsecured claims fill on	dy included in Part 1. If more ut the Continuation Page of Total claim
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Part 2: 3. Do an No Ye 4. List al unsecuthan o Part 2: 4.1 EN S N	y creditors have nonpriority unsect . You have nothing to report in this paids. If of your nonpriority unsecured claured claim, list the creditor separately ne creditor holds a particular claim, list Best Buy CBNA Onpriority Creditor's Name 800 South Corp Pl Sioux Falls, SD 57108	ured claims against you? art. Submit this form to the countings in the alphabetical order for each claim. For each claims the other creditors in Part 3 Last 4 digits When was the	er of the creditor who m listed, identify what If you have more than of account number ne debt incurred?	p holds each claim. If a creditor has mo type of claim it is. Do not list claims alrea three nonpriority unsecured claims fill or 2360	dy included in Part 1. If more ut the Continuation Page of Total claim
Part 2: 3. Do an No Ye 4. List al unsect than o Part 2.	y creditors have nonpriority unsect. You have nothing to report in this pass. If of your nonpriority unsecured claured claim, list the creditor separately ne creditor holds a particular claim, list. Best Buy CBNA on priority Creditor's Name 800 South Corp Plicioux Falls, SD 57108 umber Street City State Zip Code	ured claims against you? art. Submit this form to the countings in the alphabetical order for each claim. For each claims the other creditors in Part 3 Last 4 digits When was the	er of the creditor who m listed, identify what If you have more than of account number he debt incurred?	p holds each claim. If a creditor has mo type of claim it is. Do not list claims alrea three nonpriority unsecured claims fill or 2360	dy included in Part 1. If more ut the Continuation Page of Total claim
Part 2: 3. Do an No Ye 4. List al unsecuthan o Part 2: 4.1 EN S N W	y creditors have nonpriority unsect . You have nothing to report in this paids. s. If of your nonpriority unsecured claured claim, list the creditor separately ne creditor holds a particular claim, list. Best Buy CBNA onpriority Creditor's Name 800 South Corp Plesioux Falls, SD 57108 umber Street City State Zip Code //ho incurred the debt? Check one.	ured claims against you? art. Submit this form to the countings in the alphabetical order for each claim. For each claims the other creditors in Part 3 Last 4 digits When was the As of the dat	er of the creditor whom listed, identify what it. If you have more than of account number the debt incurred?	p holds each claim. If a creditor has mo type of claim it is. Do not list claims alrea three nonpriority unsecured claims fill or 2360	dy included in Part 1. If more ut the Continuation Page of Total claim
Part 2: 3. Do an No Ye 4. List al unsecuthan o Part 2: 4.1 EN S N W	y creditors have nonpriority unsect. You have nothing to report in this pass. I of your nonpriority unsecured claured claim, list the creditor separately ne creditor holds a particular claim, list the creditor separately ne creditor holds a particular claim, list the creditor separately ne creditor holds a particular claim, list the creditor separately ne creditor holds a particular claim, list the creditor separately ne creditor separately ne creditor separately ne creditor separately creditor separately creditor separately ne creditor separat	ured claims against you? art. Submit this form to the countings in the alphabetical order for each claim. For each claims the other creditors in Part 3 Last 4 digits When was the As of the date	er of the creditor whom listed, identify what it. If you have more than of account number the debt incurred?	p holds each claim. If a creditor has mo type of claim it is. Do not list claims alrea three nonpriority unsecured claims fill or 2360	dy included in Part 1. If more ut the Continuation Page of Total claim
Part 2: 3. Do an No Ye 4. List al unsect than o Part 2.	y creditors have nonpriority unsect. You have nothing to report in this pais. If of your nonpriority unsecured claured claim, list the creditor separately ne creditor holds a particular claim, list. Best Buy CBNA Conpriority Creditor's Name 800 South Corp Plesioux Falls, SD 57108 umber Street City State Zip Code //ho incurred the debt? Check one. Debtor 1 only	ured claims against you? art. Submit this form to the countings in the alphabetical order for each claim. For each claims the other creditors in Part 3 Last 4 digits When was the As of the date Continger Unliquidate Disputed	er of the creditor whom listed, identify what it. If you have more than of account number the debt incurred?	b holds each claim. If a creditor has mo type of claim it is. Do not list claims alrea three nonpriority unsecured claims fill or 2360 11/26/2019 is: Check all that apply	dy included in Part 1. If more ut the Continuation Page of Total claim
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Part 2: 3. Do an No Ye 4. List al unsect than o Part 2.	y creditors have nonpriority unsect. You have nothing to report in this pais. I of your nonpriority unsecured claured claim, list the creditor separately ne creditor holds a particular claim, list. Best Buy CBNA onpriority Creditor's Name 800 South Corp Plaioux Falls, SD 57108 umber Street City State Zip Code //no incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and ano Check if this claim is for a commebt	ured claims against you? art. Submit this form to the countings in the alphabetical order for each claim. For each claims the other creditors in Part 3 Last 4 digits When was the As of the date Continger Unliquidate Disputed Type of NON Student to Unliquity Student to Obligation	er of the creditor whom listed, identify what it is incompared to the count number of account number one debt incurred? It is you file, the claim of the claim it it is incurred incurred. IPRIORITY unsecure one can see a crising out of a separation of the count incurred incurred incurred.	b holds each claim. If a creditor has mo type of claim it is. Do not list claims alrea three nonpriority unsecured claims fill or 2360 11/26/2019 is: Check all that apply	dy included in Part 1. If more ut the Continuation Page of Total claim \$3,215.00
Part 2: 3. Do an No Ye 4. List al unsecuthan o Part 2: 4.1 EN No N	y creditors have nonpriority unsect. You have nothing to report in this paids. If of your nonpriority unsecured claured claim, list the creditor separately ne creditor holds a particular claim, list. Best Buy CBNA Compriority Creditor's Name 800 South Corp Plesioux Falls, SD 57108 Comber Street City State Zip Code Cho incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and ano Check if this claim is for a comment of the claim subject to offset?	ured claims against you? art. Submit this form to the countings in the alphabetical order for each claim. For each claims the other creditors in Part 3 Last 4 digits When was the As of the date Continger Unliquidate Disputed Type of NON Type of NON Student longer as priores.	er of the creditor whom listed, identify what it is included in the control of account number one debt incurred? It is you file, the claim ont it is included in the count in	b holds each claim. If a creditor has mo type of claim it is. Do not list claims alreathree nonpriority unsecured claims fill of 2360 11/26/2019 is: Check all that apply d claim:	dy included in Part 1. If more ut the Continuation Page of Total claim \$3,215.00
Part 2: 3. Do an Ye 4. List al unsecuthan o Part 2: 4.1 BN 55 SN W	y creditors have nonpriority unsect. You have nothing to report in this pais. I of your nonpriority unsecured claured claim, list the creditor separately ne creditor holds a particular claim, list. Best Buy CBNA onpriority Creditor's Name 800 South Corp Plaioux Falls, SD 57108 umber Street City State Zip Code //no incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and ano Check if this claim is for a commebt	ured claims against you? art. Submit this form to the countries in the alphabetical order or each claim. For each claims the other creditors in Part 3 Last 4 digits When was the As of the date Continger Unliquidate Disputed Type of NON Student long Obligation report as prio Debts to purchassing Control of Continger Debts to purchassing Control of	er of the creditor whom listed, identify what it is included in the control of account number one debt incurred? It is you file, the claim ont it is included in the count in	b holds each claim. If a creditor has mo type of claim it is. Do not list claims alreathree nonpriority unsecured claims fill of 2360 11/26/2019 is: Check all that apply d claim: aration agreement or divorce that you did to g plans, and other similar debts	dy included in Part 1. If more ut the Continuation Page of Total claim \$3,215.00

5/12/25 10:27AM Case number (if known) Debtor 1 Saddam Rawashdeh 4.2 \$4,436.00 Capital One Bank USA NA Last 4 digits of account number 6569 Nonpriority Creditor's Name PO Box 31293 When was the debt incurred? 03/04/2020 Salt Lake City, UT 84131-1293 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.3 Capital One Bank USA NA Last 4 digits of account number 3286 \$4,766.00 Nonpriority Creditor's Name PO Box 31293 When was the debt incurred? 08/01/2014 Salt Lake City, UT 84131-1293 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Credit card Other. Specify 4.4 **Comenity Bank/Express** Last 4 digits of account number \$0.00 Nonpriority Creditor's Name PO Box 182789 When was the debt incurred? 07/2019 Columbus, OH 43218-2789 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community

Is the claim subject to offset?

- No
- ☐ Yes

- ☐ Contingent
- Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- \square Obligations arising out of a separation agreement or divorce that you did not
- report as priority claims
- $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify Credit card

5/12/25 10:27AM Case number (if known) Debtor 1 Saddam Rawashdeh 4.5 \$1,445.00 **Credit One Bank** Last 4 digits of account number 8333 Nonpriority Creditor's Name PO Box 98873 When was the debt incurred? 11/30/2016 Las Vegas, NV 89193-8873 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card ☐ Yes 4.6 **Credit One Bank** Last 4 digits of account number 6137 \$2,858.00 Nonpriority Creditor's Name PO Box 98873 When was the debt incurred? 07/24/2019 Las Vegas, NV 89193-8873 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit card** Other. Specify 4.7 **Department of Education** Last 4 digits of account number 0409 \$2,147.00 Nonpriority Creditor's Name 121 S 13th St When was the debt incurred? 09/17/2023 Lincoln, NE 68508-1904 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only

■ No ☐ Yes

 \square At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

Type of NONPRIORITY unsecured claim:

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Student loan

Student loans

☐ Other. Specify

report as priority claims

Debtor	1 Saddam Rawashdeh		Case number (if known)					
4.8	Department of Education Nonpriority Creditor's Name	Last 4 digits of account number	0309	\$1,742.00				
	121 S 13th St	When was the debt incurred?	09/17/2023					
	Lincoln, NE 68508-1904							
	Number Street City State Zip Code							
	Who incurred the debt? Check one.	ho incurred the debt? Check one.						
	Debtor 1 only	Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts					
	☐ Yes	Other. Specify						
		Student lo	an					
40	Department of Education		4044	\$40.04F.00				
4.9	Department of Education Nonpriority Creditor's Name	Last 4 digits of account number	1011	\$12,845.00				
	121 S 13th St	When was the debt incurred?	09/22/2016					
	Lincoln, NE 68508-1904	_						
	Number Street City State Zip Code	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.							
	■ Debtor 1 only	Contingent						
	☐ Debtor 2 only	Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts					
	☐ Yes	Other. Specify						
	Li res	Student lo	an					
		Studentio	ali					
4.1	Discover Bank Nonpriority Creditor's Name	Last 4 digits of account number	9502	\$4,458.00				
	PO Bank 30939	When was the debt incurred?	12/13/2021					
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.	,	5					
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt		aration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	■ No	Debts to pension or profit-shari						
	Yes	Other. Specify Credit card	<u> </u>					

Debtor 1 Sa	ddam Rawashdeh		Case number (if known)	
I	ington Bank	Last 4 digits of account number	1321	\$206.00
Nonpri	ority Creditor's Name	When was the debt incurred?	05/06/2024	
Colu	mbus, OH 43216	_		
	er Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
_	ncurred the debt? Check one.	_		
_	btor 1 only	Contingent		
_	btor 2 only	Unliquidated		
	btor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	Lateta	
	east one of the debtors and another	Student loans	d claim:	
debt	eck if this claim is for a community claim subject to offset?	<u></u>	ration agreement or divorce that you did not	
■ No	ciaim subject to onset?	Debts to pension or profit-sharin	a plans, and other similar debts	
☐ Ye	3	■ Other. Specify Credit card		
Hunt	ington National Bank	Last 4 digits of account number	7557	\$100.00
	ority Creditor's Name			¥10000
Colu	Credit Bureau Disputes mbus, OH 43216	When was the debt incurred?	05/30/2021	
	er Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
_	ncurred the debt? Check one.	_		
	btor 1 only	☐ Contingent		
	btor 2 only	☐ Unliquidated		
	btor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d alaim.	
_	east one of the debtors and another	Student loans	J Claiii.	
⊔ Ch debt	eck if this claim is for a community	<u></u>	ration agreement or divorce that you did not	
Is the	claim subject to offset?	report as priority claims	nation agreement of alvorce that you did not	
■ No		Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Ye	S	Other. Specify Credit card		
Kohl	s/Capital One	Last 4 digits of account number	0772	\$800.00
	ority Creditor's Name		05/07/0000	
	ox 3115 aukee, WI 53201-3115	When was the debt incurred?	05/27/2023	
Numbe	er Street City State Zip Code ncurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ De	btor 1 only	☐ Contingent		
	btor 2 only	☐ Unliquidated		
	btor 1 and Debtor 2 only	☐ Disputed		
☐ At	east one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
□сһ	eck if this claim is for a community	☐ Student loans		
debt	alaim authiast ta affa 12		ration agreement or divorce that you did not	
	claim subject to offset?	report as priority claims	a plane, and other similar debts	
■ No		Debts to pension or profit-sharin		
☐ Ye	5	Other. Specify Credit card		

5/12/25 10:27AM Debtor 1 Saddam Rawashdeh Case number (if known) 4.1 Lending Club Bank NA 3967 \$11,795.00 Last 4 digits of account number 4 Nonpriority Creditor's Name 595 Market St Ste 200 When was the debt incurred? Unknown San Francisco, CA 94105-2802 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Signature loan ☐ Yes 4.1 Stark State College 0205 \$916.00 Last 4 digits of account number 5 Nonpriority Creditor's Name **6200 Ave NW** When was the debt incurred? 02/09/2024 North Canton, OH 44720 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify College bill ☐ Yes 4.1 6 917.00

SyncB/Care Credit	Last 4 digits of account number	0451	\$3,
Nonpriority Creditor's Name PO Box 71757 Philadelphia, PA 19176-1757	When was the debt incurred?	12/29/2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	claim:	
☐ Acteast one of the debtors and another ☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separ report as priority claims	ration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
□Yes	Other. Specify Medical bill	credit	

5/12/25 10:27AM Case number (if known) Debtor 1 Saddam Rawashdeh 4.1 SyncB/JC Penneys 6350 \$439.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 71729 09/12/2021 When was the debt incurred? Philadelphia, PA 19176-1729 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card ☐ Yes 4.1 SyncB/Paypal 4155 \$1,477.00 Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 71727 When was the debt incurred? 06/12/2022 Philadelphia, PA 19176-1727 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

■ Other. Specify Credit card

☐ Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

Part 4: Add the Amounts for Each Type of Unsecured Claim

☐ Check if this claim is for a community

Is the claim subject to offset?

debt

■ No

☐ Yes

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 16,734.00
Total claims from Part 2	6a.	Obligations arising out of a separation agreement or divorce that		
nom rait 2	og.	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$

☐ Student loans

report as priority claims

Debtor 1 Saddam Rawashdeh

Case number (if known)

- 6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.
- 6j. **Total Nonpriority.** Add lines 6f through 6i.

6i. \$ 40,828.00

6j. \$ **57,562.00**

Fill in this inform	Fill in this information to identify your case:							
Debtor 1	Saddam Rawasho	deh						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF OHIO					
Case number								
(if known)						Check if this is an amended filing		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the ear, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	-				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
	•				

		Caso.		
Fill in this	s information to identify your	casc.		
Debtor 1	Saddam Rawash First Name	deh Middle Name	Last Name	
Debtor 2	i list manie	Wildle Name	Last Name	
(Spouse if, fili	ing) First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case num (if known)	ber			☐ Check if this is an amended filing
	l Form 106H Jule H: Your Co d	ebtors		12/15
eople are	e filing together, both are equ	ally responsible for supp boxes on the left. Attach	lying correct informat the Additional Page t	is complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Page this page. On the top of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case, o	do not list either spouse	as a codebtor.
■ No				
☐ Yes				
Arizor	thin the last 8 years, have you ha, California, Idaho, Louisiana . Go to line 3. s. Did your spouse, former spo	, Nevada, New Mexico, Pu	erto Rico, Texas, Wash	ry? (Community property states and territories include ington, and Wisconsin.)
3 In Co		ors. Do not include your	•	
in line Form out C	106D), Schedule E/F (Officia olumn 2. Column 1: Your codebtor	if that person is a guaran I Form 106E/F), or Schedi	tor or cosigner. Make	rif your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offic 16G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the deb
in line Form out C	106Ď), Schedule E/F (Officia olumn 2.	if that person is a guaran I Form 106E/F), or Schedi	tor or cosigner. Make	sure you have listed the creditor on Schedule D (Offic 16G). Use Schedule D, Schedule E/F, or Schedule G to
in line Form out C	106D), Schedule E/F (Officia olumn 2. Column 1: Your codebtor Name, Number, Street, City, State and Z	if that person is a guaran I Form 106E/F), or Schedi	tor or cosigner. Make	sure you have listed the creditor on Schedule D (Offic 16G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the deb
in line Form out C	106D), Schedule E/F (Officia olumn 2. Column 1: Your codebtor	if that person is a guaran I Form 106E/F), or Schedi	tor or cosigner. Make	Sure you have listed the creditor on Schedule D (Offic 16G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line
in line Form out C	106D), Schedule E/F (Officia olumn 2. Column 1: Your codebtor Name, Number, Street, City, State and Z	if that person is a guaran I Form 106E/F), or Schedi	tor or cosigner. Make	Sure you have listed the creditor on Schedule D (Offic 16G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line
in line Form out C	106D), Schedule E/F (Officia olumn 2. Column 1: Your codebtor Name, Number, Street, City, State and Z	if that person is a guaran I Form 106E/F), or Schedi	tor or cosigner. Make	Sure you have listed the creditor on Schedule D (Offic 16G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line
in line Form out C	106D), Schedule E/F (Official olumn 2. Column 1: Your codebtor Name, Number, Street, City, State and Z	if that person is a guarant I Form 106E/F), or Schedi	tor or cosigner. Make ule G (Official Form 10	Sure you have listed the creditor on Schedule D (Offic 16G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
in line Form out C	106D), Schedule E/F (Official olumn 2. Column 1: Your codebtor Name, Number, Street, City, State and Z	if that person is a guarant I Form 106E/F), or Schedi	tor or cosigner. Make ule G (Official Form 10	Sure you have listed the creditor on Schedule D (Offic 16G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the deb
in line Form out C	106D), Schedule E/F (Official olumn 2. Column 1: Your codebtor Name, Number, Street, City, State and Z Name Number Street City	if that person is a guarant I Form 106E/F), or Schedi	tor or cosigner. Make ule G (Official Form 10	Sure you have listed the creditor on Schedule D (Offic 16G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
in line Form out C	106D), Schedule E/F (Official olumn 2. Column 1: Your codebtor Name, Number, Street, City, State and Z Name Number Street City	if that person is a guarant I Form 106E/F), or Schedi	tor or cosigner. Make ule G (Official Form 10	Sure you have listed the creditor on Schedule D (Offic 16G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the deb

Fill in this information t	o identify your case:	
Debtor 1	Saddam Rawashdeh	
Debtor 2 (Spouse, if filing)		
United States Bankrup	otcy Court for the: NORTHERN DISTRICT OF OHIO	
Case number (If known)		Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Form		13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Describe Employment				
1.	Fill in your employment information.		Debtor	1	Debtor 2 or non-filing spouse
	If you have more than one job,	Employment status	■ Emp	loyed	☐ Employed
	attach a separate page with information about additional	Employment status	□ Not e	employed	☐ Not employed
	employers.	Occupation	Kitche	n	
	Include part-time, seasonal, or self-employed work.	Employer's name	T A M	R Mediterranean Grille	
	Occupation may include student or homemaker, if it applies.	Employer's address		Cent Rd OH 44224	
		How long employed th	nere?	2 years	_

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 1,453.83 N/A deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 +\$ N/A Calculate gross Income. Add line 2 + line 3. 1,453.83 \$ N/A

Deb	otor 1	Saddam Rawashdeh	_		Case	number (if i	known	_					
					For	Debtor 1			For Del				
	Cop	by line 4 here	4.		\$	1,45	3.83		\$	iig sp	N/		
5.	l ist	all payroll deductions:											
0.	5a.	Tax, Medicare, and Social Security deductions	5a		\$		0.00		\$		NI/	^	
	5a. 5b.	Mandatory contributions for retirement plans	5a 5b		\$ —		0.00	_	\$		N/A		
	5c.	Voluntary contributions for retirement plans	5c.		\$_		0.00	_	\$		N/	_	
	5d.	Required repayments of retirement fund loans	5d		\$_		0.00	_	\$		N/		
	5e.	Insurance	5e		\$		0.00	_	\$		N/		
	5f.	Domestic support obligations	5f.		\$		0.00)	\$		N/	Α	
	5g.	Union dues	5g		\$		0.00)	\$		N/		
	5h.	Other deductions. Specify:	5h	.+	\$		0.00) +	\$		N/	A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$		0.00)	\$		N/	Α_	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,45	3.83	3_	\$		N/	A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$		0.00)	\$		N/	Δ	
	8b.	Interest and dividends	8b		\$_		0.00		\$		N/		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$		5.00	_	\$		N/		
	8d.	Unemployment compensation	8d		\$-		0.00	_	\$		N/		
	8e.	Social Security	8e		\$_		0.00	_	\$		N/		
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$		0.00	<u> </u>	\$		N/		
	8g.	Pension or retirement income	8g		\$		0.00		\$		N/		
	8h.	Other monthly income. Specify:	8h	.+	\$_		0.00	_ +	\$		N/	<u>A</u>	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	11	5.00)	\$		N	/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	,	1,568.83	+	\$	N	\/A	= \$	1	,568.83
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe			•			in Sche				0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies							fit	12.	\$	1	,568.83
13.	Do	you expect an increase or decrease within the year after you file this form	?								Comb mont		d ncome

Yes. Explain:

	in thin i nformer	tion to identify						
		ition to identify yo	ur case:					
Deb	tor 1	Saddam Raw	<i>ı</i> ashdeh				ck if this is:	
Deb	tor 2						An amended filing	ving postpetition chapter
	ouse, if filing)						13 expenses as of	
Unit	ed States Bankr	ruptcy Court for the:	NORTH	IERN DISTRICT OF OHI	0	-	MM / DD / YYYY	
Cas	e number							
	nown)							
Of	fficial Fo	orm 106J						
			 Evnor	1000				10/15
		J: Your I		ISES . If two married people a	ero filing togothor, be	oth are equ	ally responsible fo	12/15
info	ormation. If m		eded, atta	ch another sheet to this				
Par	t 1: Descr	ribe Your House	hold					
1.	Is this a joir							
	■ No. Go to	o line 2. es Debtor 2 live i	n a sonar	ate household?				
	□ res. Doe		ii a sepai	ate nousenous:				
			t file Offici	al Form 106J-2, <i>Expense</i>	es for Separate House	hold of Deb	otor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list Do Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Son		_ 7	■ Yes
								□ No
								☐ Yes
								□ No □ Yes
							_	☐ Yes
								☐ Yes
3.	Do vour ext	oenses include		No				□ 1es
	expenses of	f people other the dynamics of the dependent of the depen	han $_{f \Box}$	No Yes				
Par	t 2: Estim	ate Your Ongoir	na Monthi	v Expenses				
Est exp	imate your ex	cpenses as of yo	our bankrı	uptcy filing date unless				pter 13 case to report f the form and fill in the
Incl	lude exnense	s naid for with r	non-cash	government assistance	if you know			
the		h assistance and		cluded it on Schedule I:			Your expe	enses
4.	The rental o	or home owners	hin avnan	ses for your residence.	Include first mortgage	,		
т.		nd any rent for the		-	moldde mst mortgage	4. \$	\$	1,219.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$	\$	0.00
		rty, homeowner's				4b. \$	· ————————————————————————————————————	0.00
				ıpkeep expenses		4c. \$		0.00
5		owner's associati		dominium dues o ur residence , such as h	ome equity loans	4d. §	·	0.00

ebtor 1	Saddam	Rawashdeh		Case num	ber (if known)
	ties:					
6. Utili 6a.		heat, natural gas		6a.	\$	100.00
6b.		ver, garbage collection		6b.	·	0.00
6c.		e, cell phone, Internet, satellite, and cab	lo convicos	6c.	· —	
	•	• • • • • • • • • • • • • • • • • • • •	ile Services		·	0.00
6d.	Other. Spe			6d.	·	0.00
		ekeeping supplies		7.		0.00
		hildren's education costs		8.	\$	0.00
	-	ry, and dry cleaning		9.	\$	0.00
0. Pers	sonal care p	roducts and services		10.	\$	0.00
 Med 	lical and dei	ntal expenses		11.	\$	0.00
	nsportation. not include ca	Include gas, maintenance, bus or train	fare.	12.	\$	0.00
			rines and books	13.	·	
		clubs, recreation, newspapers, maga	izines, and books		·	0.00
		ributions and religious donations		14.	5	0.00
5. Ins u						
		surance deducted from your pay or inc	luded in lines 4 or 20.	45.	Φ.	• • •
	. Life insura			15a.	·	0.00
	. Health ins			15b.	· —	0.00
15c.	. Vehicle ins	surance		15c.	\$	0.00
15d.	. Other insu	rance. Specify:		15d.	\$	0.00
6. Tax e	es. Do not in	clude taxes deducted from your pay or	included in lines 4 or 20.			
Spe				16.	\$	0.00
		ease payments:				
		ents for Vehicle 1		17a.		433.00
17b.	. Car payme	ents for Vehicle 2		17b.	\$	0.00
17c.	Other. Spe	ecify:		17c.	\$	0.00
17d.	. Other. Spe	ecify:		17d.	\$	0.00
		of alimony, maintenance, and suppo			Φ.	0.00
ded	ucted from	your pay on line 5, Schedule I, Your I	Income (Official Form 106I).	18.		
		you make to support others who do	not live with you.		\$	0.00
Spe	·			19.	_	
		erty expenses not included in lines 4	or 5 of this form or on <i>Sch</i> e			
		on other property		20a.	·	0.00
20b.	. Real estat	e taxes		20b.	\$	0.00
		nomeowner's, or renter's insurance		20c.	\$	0.00
20d.	. Maintenan	ce, repair, and upkeep expenses		20d.	\$	0.00
		er's association or condominium dues		20e.	\$	0.00
1. Othe	er: Specify:			21.		0.00
					· +	0.00
	-	nonthly expenses				
	. Add lines 4	3			\$	1,752.00
22b.	. Copy line 22	2 (monthly expenses for Debtor 2), if ar	ny, from Official Form 106J-2		\$	
22c.	Add line 22a	a and 22b. The result is your monthly e	expenses.		\$	1,752.00
		•				.,,,,,,,,,
	-	nonthly net income.			_	_
		12 (your combined monthly income) fro		23a.	*	1,568.83
23b.	. Copy your	monthly expenses from line 22c above).	23b.	-\$	1,752.00
	0.1.					
23c.		our monthly expenses from your month is your <i>monthly net income</i> .	ly income.	23c.	\$	-183.17
	rne result	is your monuny neumcome.		_00.		
24. Do v	you expect a	n increase or decrease in your expe	nses within the year after vo	u file this	form?	
		u expect to finish paying for your car loan wi				ncrease or decrease because of a
		terms of your mortgage?	, , , , , , , , , , , , , , , , , , , ,	3 0 - 1	•	
	No.					
ΠY	/ec	Explain here:				

Fill in this info	ormation to identify your	case:			
Debtor 1	Saddam Rawash	deh			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	NORTHERN DISTRICT	r of ohio		
Case number					
(if known)					Check if this is an
<u> </u>					mended filing
You must file th obtaining mone	his form whenever you fi	le bankruptcy schedule n connection with a ban		ect information. Making a false statement, conc n fines up to \$250,000, or impris	
Sig	gn Below				
Did you p	pay or agree to pay some	one who is NOT an atto	rney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petiti	ion Preparer's Notice,
	·			Declaration, and Signat	ure (Official Form 119)
that they a X /s/ Sa Sadda	nalty of perjury, I declare are true and correct. addam Rawashdeh am Rawashdeh ture of Debtor 1	that I have read the sun	xSignature of I	d with this declaration and Debtor 2	
5			5 .		
Date	May 12, 2025		Date		

Eill	in this inform	nation to identify you	r casa:							
Deb	otor 1	Saddam Rawasl First Name	Middle Name	Last Name						
	otor 2	- AN								
(Spo	use if, filing)	First Name	Middle Name	Last Name						
Unit	ted States Bar	kruptcy Court for the:	NORTHERN DISTRICT C	OF OHIO						
Cas	e number									
(if kn	own)				_	Check if this is an				
					a	mended filing				
○ ti	Saial Far	107								
	ficial For		A (Calina Cambo disali	landa Eilian (an B						
			Affairs for Individ		<u> </u>	04/25				
					equally responsible for sup additional pages, write you					
		i). Answer every que			y additional pages, write you	in manie and base				
Par	t 1: Give D	etails About Your Ma	arital Status and Where You	Lived Before						
1.	What is your	current marital statu	16.7							
•	wilat is your	Current maritar statt	15 :							
	☐ Married									
	Not mare	ried								
2.	During the la	ring the last 3 years, have you lived anywhere other than where you live now?								
	■ No									
	_	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>l</i> .					
			·	·		Datas Dahtas 2				
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ad	aress:	Dates Debtor 2 lived there				
					ity property state or territory ico, Texas, Washington and W					
	■ No									
	_	ke sure you fill out Scl	hedule H: Your Codebtors (Of	ficial Form 106H).						
Par	Explain	n the Sources of You	r Income							
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?				
	□ No									
	_	in the details.								
			Dobtov 4		Debtor 2					
			Debtor 1 Sources of income	Gross income	Sources of income	Gross income				
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)				
	last calendar nuary 1 to De	year: cember 31, 2024)	■ Wages, commissions, bonuses, tips	\$18,000.00	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					

				Debtor 1				Debtor 2			
					of income that apply.		income e deductions and iions)		of income that apply.	(b	ross income efore deductions ad exclusions)
		dar year be December		■ Wages bonuses,	s, commissions, tips		\$23,565.00	☐ Wages bonuses,	s, commissior tips	ns,	
				☐ Opera	ting a business			☐ Opera	ting a busines	SS	
5.	Include in and other winnings.	come regard public bene If you are fil	dless of wheth fit payments; ing a joint cas	ner that inco pensions; r se and you l	e during this year or the two previous calendar years? er that income is taxable. Examples of other income are alimony; child support; Social Spensions; rental income; interest; dividends; money collected from lawsuits; royalties; are and you have income that you received together, list it only once under Debtor 1. me from each source separately. Do not include income that you listed in line 4.				es; and gar		
	☐ Yes.	Fill in the de	etails.								
				Debtor 1				Debtor 2			
					of income below.	each	s income from source e deductions and sions)		of income	(b	ross income efore deductions ad exclusions)
Pa	rt 3: Lis	t Certain Pa	avments You	Made Befo	ore You Filed for	Bankrup	tcv				
	■ Yes.	individual During the No. Yes * Subject	primarily for a 90 days before Go to line 7 List below expaid that crunot include to adjustment or Debtor 2 or 90 days before Go to line 7 List below expanding to the second sec	personal, for you filed a cach creditor. Do no payments to a 4/01/28 or both have green you filed a cach creditor ments for do not so the cach cach cach cach cach cach cach ca	amily, or househor for bankruptcy, d or to whom you pa not include payme o an attorney for t and every 3 year e primarily consi for bankruptcy, d or to whom you pa nomestic support of	id you pay id a total of this bankri rs after that umer deb id you pay	e." y any creditor a tot of \$8,575* or more mestic support obl uptcy case. at for cases filed o ts. y any creditor a tot of \$600 or more an	e in one or mo ligations, such n or after the tal of \$600 or	or more? The payments of as child supplicate of adjusting more?	and the to port and al tment.	limony. Alsó, do
	Creditor	's Name an	d Address		Dates of payme	ent	Total amount paid	Amount y		this paym	ent for
7. Within 1 year before you filed for bankrup: Insiders include your relatives; any general p of which you are an officer, director, person in a business you operate as a sole proprietor. alimony. No			general par , person in roprietor. 11	rtners; relatives of control, or owner	any gene of 20% or	nt on a debt you or ral partners; partn more of their votir	owed anyone nerships of wh ng securities;	e who was and ich you are a and any mana	general pa aging ager	artner; corporations nt, including one for	
			nents to an in	sider.	Dates of man	4	Tatal amazumt	A 100 0 0 0 0 1 0	veu De	on for the	0 10 0 1 100 0 15 ⁴
	Insider's	Name and	Address		Dates of payme	ent	Total amount	Amount y		on for thi	s payment

Official Form 107

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

	or gambling?					
	No☐ Yes. Fill in the details.					
	how the loss occurred	escribe any insurance aclude the amount that in asurance claims on line	nsurance has paid. Li	st pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers					
16.	Within 1 year before you filed for bankruptconsulted about seeking bankruptcy or pre Include any attorneys, bankruptcy petition pre	eparing a bankruptcy	petition?			erty to anyone you
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	transferred	d value of any prope	erty	Date payment or transfer was made	Amount of payment
17.	Within 1 year before you filed for bankrupte promised to help you deal with your credit Do not include any payment or transfer that you	cy, did you or anyone ors or to make payme			or transfer any propo	erty to anyone who
	Yes. Fill in the details. Person Who Was Paid	Description an	d value of any prope	artv	Date payment	Amount of
	Address	transferred	Description and value of any property transferred			payment
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your I Include both outright transfers and transfers minclude gifts and transfers that you have alrea No Yes. Fill in the details.	business or financial a nade as security (such a	Iffairs? Is the granting of a se			
	Person Who Received Transfer	Description an	d value of	Describe a	any property or	Date transfer was
	Address		property transferred payments paid in exc			made
	Person's relationship to you					
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-plane) ■ No □ Yes. Fill in the details.		any property to a se	elf-settled tru	ust or similar device	of which you are a
	Name of trust	Description an	d value of the prope	rty transferr	ed	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Ir	nstruments, Safe Depo	sit Boxes, and Stora	age Units		
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or other financial acco	ounts; certificates of			
	Yes. Fill in the details.		_	_		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clo	te account was sed, sold, oved, or	Last balance before closing or transfer

21.	Do you now have, or did you have within 1 year cash, or other valuables?	before you filed for bankruptcy, ar	ny safe deposit box or other deposito	ry for securities,					
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?					
22.	_	ace other than your home within 1	year before you filed for bankruptcy?	?					
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?					
Par	t 9: Identify Property You Hold or Control for S	Someone Else							
23.	Do you hold or control any property that someo for someone.		ty you borrowed from, are storing for	, or hold in trust					
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value					
Par	t 10: Give Details About Environmental Informa	ation							
or	the purpose of Part 10, the following definitions	apply:							
	Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these substances.	r, land, soil, surface water, ground							
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		aw, whether you now own, operate, o	or utilize it or used					
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic s	substance,					
₹ер	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.						
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under or in violation of an environme	ental law?					
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any	release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
		,							

De	btor 1 Saddam Rawashdeh		Case number (if known)	
26.	Have you been a party in any judicial or admi	nistrative proceeding under any envi	ironmental law? Include settlements	and orders.
	■ No			
	Yes. Fill in the details.			
	Case Title	been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orde Fill in the details. Court or agency Name Address (Number, Street, City, State and ZIP Code) Potatils About Your Business or Connections to Any Business Potatails About Your Business or Connections to Any Business Potatails About Your Business or Connections to Any Business Potatails About Your Business or Connections to Any Business Potatails About Your Business or Connections to Any Business Potatails About Your Business or Connections to Any Business Potatails About Your Business or Connections to Any Business Potatails About Your Business or Connections to Any Business Potatails About Your Business or Indicated Statement of a limited liability partnership (LLP) Partner in a partnership or Griever, G	Status of the	
	Case Number	Address (Number, Street, City,		case
Pa	rt 11: Give Details About Your Business or Co	•		
			ov of the following connections to an	v husiness?
21.		•		y business?
	_		·	
	<u> </u>	iny (LLC) or infinited hability partiters in	ip (LLF)	
	<u> </u>	outive of a corneration		
	_	•		
	_			
	_			
				not include Social Security number or ITIN.
	Address			
	(Number, Street, City, State and ZIP Code)	Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. Name of accountant or bookkeeper Dates business existed		
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	y, did you give a financial statement	to anyone about your business? Incl	ude all financial
	■ No			
	☐ Yes. Fill in the details below.			
	Name I Address	Date Issued		
	(Number, Street, City, State and ZIP Code)			
Pa	rt 12: Sign Below			
are with 18 U	true and correct. I understand that making a fa habankruptcy case can result in fines up to \$2 U.S.C. §§ 152, 1341, 1519, and 3571.	alse statement, concealing property,	or obtaining money or property by fr	
	Saddam Rawashdeh	Signature of Debtor 2		
	gnature of Debtor 1	· ·		
Da	te <u>May 12, 2025</u>	Date		
		t of Financial Affairs for Individuals I	Filing for Bankruptcy (Official Form 1	07)?
	Yes			
		nn attorney to help you fill out bankru	uptcy forms?	
	No Yes. Name of Person . Attach the <i>Bankrupt</i>	cy Petition Preparer's Notice, Declarati	on, and Signature (Official Form 119).	
- '		,	,	

Fill in this inform	nation to identify your o	case:			
Debtor 1	Saddam Rawasho				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DIST	RICT OF OHIO		
Case number					
(if known)				☐ Check if this is an amended filing	
				aniended ming	
Official Fo	rm 108				
		n for Indiv	iduals Filing Under C	hapter 7 12/15	
Otatomon	it or intontio	ii ioi iiiaiv	idadio i illing Ondor O	1213	
	vidual filing under chap	. •	out this form if:		
_	e claims secured by you ed personal property a		ot expired		
You must file this	s form with the court w ver is earlier, unless th	ithin 30 days after	you file your bankruptcy petition or by the time for cause. You must also send co		
	ople are filing together d date the form.	in a joint case, bot	th are equally responsible for supplying	correct information. Both debtors must	
	nd accurate as possib our name and case nun		needed, attach a separate sheet to this	form. On the top of any additional pages,	
Part 1: List Yo	ur Creditors Who Have	Secured Claims			
1. For any creditorinformation be	-	rt 1 of Schedule D:	: Creditors Who Have Claims Secured by	Property (Official Form 106D), fill in the	
Identify the cre	ditor and the property the	nat is collateral	What do you intend to do with the pro secures a debt?	Did you claim the property as exempt on Schedule C?	
				ac oxempt on constant of	
Creditor's Br	ridgecrest Credit		☐ Surrender the property.	□ No	
name:			Retain the property and redeem it.	<u>_</u>	
Description of	2015 Acura TLX 10	7000 miles	Retain the property and enter into a Reaffirmation Agreement.	■ Yes	
property			☐ Retain the property and [explain]:		
securing debt:					
	ur Unexpired Personal		in Cabadula O. Furantam Contracts and	Unaversity of Lance (Official Forms 1000) fill	
in the information	For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).				
Describe your un	nexpired personal prop	erty leases		Will the lease be assumed?	
Lessor's name:				□ No	
Description of lea Property:	sed			_	
r roporty.				☐ Yes	
Lessor's name: Description of lea	sed			□ No	
Property:	55G			☐ Yes	

Debto	or 1 _	Saddam Rawashdeh	Case number (if known)	
Lesso			□ No	
Descr Prope		of leased	☐ Yes	
Lesso			□ No	
Descr Prope		of leased	☐ Yes	
Lesso		ame: of leased	□ No	
Prope		i di leased	☐ Yes	
Lesso		ame: of leased	□ No	
Prope		To leased	☐ Yes	
Lesso			□ No	
Descr Prope		of leased	☐ Yes	
Part 3	3: S	Sign Below		
		alty of perjury, I declare that I have indicated m at is subject to an unexpired lease.	y intention about any property of my estate that secures a debt a	and any personal
x _/	s/ Sa	addam Rawashdeh	x	
		lam Rawashdeh ture of Debtor 1	Signature of Debtor 2	
	Date	May 12, 2025	Date	

Fill in t	his information to identify your case:					irected in this form and	in Form
Debtor	Saddam Rawashdeh		122	2A-1Sup	p:		
Debtor (Spouse,			'	■ 1. The	ere is no pres	umption of abuse	
United	States Bankruptcy Court for the: Northern District of	f Ohio	!	ар	plies will be n	o determine if a presumade under <i>Chapter 7</i>	•
Case r	number			☐ 3. The	e Means Test	icial Form 122A-2). does not apply now be service but it could ap	
						n amended filing	pry later.
Offic	cial Form 122A - 1			_ 0	5K II UIIO 10 U	amonada ming	
	pter 7 Statement of Your Cur	rent Mor	nthly Inc	ome			12/19
attach a case nu	per	vhich the additior m a presumption	nal information a of abuse becau	applies. C se you do	on the top of an o not have prin	ny additional pages, wri narily consumer debts o	te your name and or because of
1. W	/hat is your marital and filing status? Check one or	 าlv.					
_	Not married. Fill out Column A, lines 2-11.	,.					
	Married and your spouse is filing with you. Fill ou	ut both Columns	A and B, lines	2-11.			
	Married and your spouse is NOT filing with you.						
	☐ Living in the same household and are not lega	ally separated.	Fill out both Co	lumns A	and B, lines 2	2-11.	
	☐ Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evading	egally separated	d under nonban	kruptcy l	aw that applie	es or that you and you	
101(the 6	n the average monthly income that you received from all 10A). For example, if you are filing on September 15, the 6-rd in months, add the income for all 6 months and divide the total uses own the same rental property, put the income from that property is the income from that property.	nonth period would by 6. Fill in the res	l be March 1 throusult. Do not includ	ugh Augus de any inc	st 31. If the amo	ount of your monthly incomore than once. For examp	ne varied during ble, if both
•				Column Debtor		Column B Debtor 2 or non-filing spouse	
	our gross wages, salary, tips, bonuses, overtime, ayroll deductions).	and commission	ons (before all	\$	1,690.00	\$	
	limony and maintenance payments. Do not include olumn B is filled in.	payments from	a spouse if	\$	0.00	\$	
o f fro ai	Il amounts from any source which are regularly part you or your dependents, including child support om an unmarried partner, members of your household not roommates. Include regular contributions from a space include in. Do not include payments you listed on line 3.	 Include regular your depender 	r contributions nts, parents,	\$	0.00	\$	
5. N	et income from operating a business, profession,	or farm					
			otor 1				
	ross receipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>					
	ordinary and necessary operating expenses		Copy here ->	\$	0.00	\$	
	et monthly income from a business, profession, or far et income from rental and other real property	m \$	copy note >	Ψ		Ψ	
J. IN	ot mosmo nom remar and other real property	Deb	otor 1				
G	ross receipts (before all deductions)	\$ 0.00					
	rdinary and necessary operating expenses	-\$ 0.00					
N	et monthly income from rental or other real property	\$0.00	Copy here ->	\$	0.00	\$	
7. I n	terest, dividends, and royalties			\$	0.00	\$	

				Column A Debtor 1		Column E Debtor 2 non-filing		
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amoun the Social Security Act. Instead, list it here:	t received was a benefit	under					
	For you\$	0.00)_					
	For you \$ For your spouse \$							
9.	Pension or retirement income. Do not include any and benefit under the Social Security Act. Also, except as so not include any compensation, pension, pay, annuity, or United States Government in connection with a disability disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that does not exceed the amount of retired pay to which you if retired under any provision of title 10 other than chap	nount received that was a tated in the next sentence or allowance paid by the ty, combat-related injury ses. If you received any re pay only to the extent that I would otherwise be enti	e, do or etired at it	\$	0.00	\$		
10.	Income from all other sources not listed above. Sp	ecify the source and amo	ount.					
	Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism; or compensation pension, pay, and United States Government in connection with a disability disability, or death of a member of the uniformed service sources on a separate page and put the total below.	manity, or international or nuity, or allowance paid b ty, combat-related injury	oy the or					
				\$	0.00	\$		
			_	\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.	Calculate your total current monthly income. Add lir each column. Then add the total for Column A to the to		\$	1,690.00	+ \$		= \$_	1,690.00
							Total	current monthly
Part	2: Determine Whether the Means Test Applies t	o Vou					incom	ie
ган	2. Determine whether the means rest Applies t	0 100						
12.	Calculate your current monthly income for the year	. Follow these steps:						
	12a. Copy your total current monthly income from line	11		Сор	y line 11 h	iere=>	\$	1,690.00
	Multiply by 12 (the number of months in a year)						X	12
	12b. The result is your annual income for this part of th	e form				12	2b. \$	20,280.00
13.	Calculate the median family income that applies to	you. Follow these steps:						
	Fill in the state in which you live.	ОН						
	Fill in the number of people in your household.	2						
	Fill in the median family income for your state and size	***************************************				13	3. \$	79,491.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank		cified	in the separa	ate instruct	tions		
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official		ck box	1, There is	no presum	ption of abu	use.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.	of page 1, check box 2, 7	The pre	esumption of	f abuse is o	determined	by Form 1	22A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information on t	his sta	tement and	in any atta	chments is	true and c	orrect.
	χ /s/ Saddam Rawashdeh							
	Saddam Rawashdeh							
	Signature of Debtor 1							
	Date May 12, 2025							

Debtor 1	Saddam Rawashdeh	Case number (if known)	
	MM/DD/YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form).	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation	
	\$245	filing fee	
	\$78	administrative fee	
<u>+</u>	\$15	trustee surcharge	
	\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Northern District of Ohio

In re	Saddam Raw	ashdeh		Case No.	
			Debtor(s)	Chapter	7
	DIS	SCLOSURE OF COM	PENSATION OF ATTOI	RNEY FOR DE	EBTOR(S)
C	compensation paid t	to me within one year before the	2016(b), I certify that I am the attorn e filing of the petition in bankruptcy, tion of or in connection with the ban	or agreed to be paid	to me, for services rendered or to
	For legal service	ces, I have agreed to accept		\$	0.00
			ived		0.00
					0.00
2.		ompensation paid to me was:			
	Debtor	☐ Other (specify):			
3.	The source of comp	ensation to be paid to me is:			
	Debtor	☐ Other (specify):			
4.	■ I have not agree	ed to share the above-disclosed	compensation with any other person	unless they are mem	bers and associates of my law firm
			pensation with a person or persons vale names of the people sharing in the		
5.	In return for the abo	ove-disclosed fee, I have agreed	to render legal service for all aspect	s of the bankruptcy c	ase, including:
t c	o. Preparation and a Representation of I. [Other provision Negotiation reaffirms]	filing of any petition, schedules of the debtor at the meeting of casts as needed] ons with secured creditors	rendering advice to the debtor in detect, statement of affairs and plan which reditors and confirmation hearing, are to reduce to market value; executions as needed; preparation n household goods.	n may be required; and any adjourned hear emption planning;	rings thereof;
6. I	Represen		ed fee does not include the following y dischargeability actions, judi		es, relief from stay actions or
			CERTIFICATION		
	certify that the foreankruptcy proceeding		of any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
М	ay 12, 2025		/s/ Rebecca J. Sr	emack	
	ate		Rebecca J. Srem		
			Signature of Attorne		
			Sremack Law Fir 2745 South Arling		
			Akron, OH 44312		
			(330) 644-0061 F	ax: (330) 644-7241	
			info@sremacklav	v.com	
			Name of law firm		

United States Bankruptcy Court Northern District of Ohio

In re	Saddam Rawashdeh		Case No.	
		Debtor(s)	Chapter	7
	VERI	FICATION OF CREDITOR	MATRIX	
The abo	ove-named Debtor hereby verifies the	hat the attached list of creditors is true and	correct to the best	t of his/her knowledge.
Date:	May 12, 2025	/s/ Saddam Rawashdeh		
		Saddam Rawashdeh		
		Signature of Debtor		

Best Buy CBNA 5800 South Corp Pl Sioux Falls, SD 57108

Bridgecrest Credit 1800 N Colorado St Gilbert, AZ 85233

Capital One Bank USA NA PO Box 31293 Salt Lake City, UT 84131-1293

Comenity Bank/Express PO Box 182789 Columbus, OH 43218-2789

Credit One Bank PO Box 98873 Las Vegas, NV 89193-8873

Department of Education 121 S 13th St Lincoln, NE 68508-1904

Discover Bank PO Bank 30939 Salt Lake City, UT 84130-0939

Huntington Bank Columbus, OH 43216

Huntington National Bank Attn: Credit Bureau Disputes Columbus, OH 43216

Kohls/Capital One PO Box 3115 Milwaukee, WI 53201-3115

Lending Club Bank NA 595 Market St Ste 200 San Francisco, CA 94105-2802 Stark State College 6200 Ave NW North Canton, OH 44720

SyncB/Care Credit PO Box 71757 Philadelphia, PA 19176-1757

SyncB/JC Penneys PO Box 71729 Philadelphia, PA 19176-1729

SyncB/Paypal PO Box 71727 Philadelphia, PA 19176-1727